

## Book reviews

### The elimination of morality. Reflections on utilitarianism and bioethics

Anne Maclean, London, Routledge, 1993, 219 pages, £35.00 hb, £10.99 pb

Philosophy is often looked at as a curious intellectual activity which rarely leads to definite conclusions, where attempts to solve problems lead to further problems, and where doubt prevails over certainty. But Maclean's book rather unexpectedly accuses philosophers of the opposite. Reflecting upon the development of medical ethics Maclean is concerned that moral philosophers pretend to have the same sort of expertise in moral issues arising in medicine as doctors have in their professional practice. She is particularly concerned that this alleged expertise will be imposed on health care professionals, many of whom have recently been studying medical ethics in departments of philosophy in the UK.

The main claim of the book is that philosophers have no more authority than others in the area of morality, and that their 'imagined ability' (page 199) to teach morality (for example, to pronounce on the moral aspects of abortion, euthanasia, genetic engineering, etc) should be 'unmasked', along the same lines as in Ian Kennedy's book *Unmasking Medicine*. Her central attack is directed at 'bioethicists', whom the author defines as those philosophers who represent the utilitarian approach to moral issues in medical ethics. A large part of the book comprises an interesting critical analysis of John Harris's book *The Value of Life* and his paper *The Survival Lottery*, Peter Singer's *The Expanding Circle*, James Rachel's *The End of Life* and R M Hare's *Moral Thinking*.

Her general criticism of the utilitar-

ians is that their approach to morality, based on the maximizing principle, is not the only rational one. This is so obviously true, in the light of the vast literature on the subject, that it hardly needed any demonstration. And the variety of ethical systems available also implies that there is no substance to Maclean's fear that utilitarians will have a monopoly of moral authority.

That, in turn, casts doubt on her call for the 'ethical recovery' of medical ethics. The ethical recovery would mean, apparently, that instead of engaging in the 'construction of fanciful scenarios', and 'self-indulging displays of intellectual virtuosity' (page 203), medical ethics should concentrate on 'familiar values' such as those expressed in the principles of beneficence, truth-telling, respect for autonomy, dignity, justice and equity among people (page 200).

The trouble is, however, that these values do not get us very far in dealing with complicated moral problems in medical ethics without the mental gymnastics for which Maclean reproaches philosophers. Also, recent medical developments – for example, of genetic engineering – seem to allow for scenarios no less 'fanciful' than many of those considered by philosophers!

As to the fear that philosophers may be accorded undue moral authority, my own experience of teaching medical ethics rather disproves it. Medical students are not so gullible as to trust alleged philosophical expertise. Secondly, the very development of varied ethical systems provides safeguards against it. If philosophers are nowhere near reaching agreement on moral issues there is no danger that they can impose such agreement on others.

If, nevertheless, someone believed that students of medical ethics were in real danger of attributing moral authority to philosophers, he or she should be advised to read the introduction to Singer's *Applied Ethics*, in

which he quotes the philosophers A J Ayer and C D Broad as saying exactly the same thing as Maclean claims in her book, namely that philosophers are not in a position to teach others moral virtue. Such a person should also be recommended to read at least the introduction to one of the best books on medical ethics, Jonathan Glover's *Causing Death and Saving Lives*, in which the author – aware of how uncertain are his own answers to the moral problems he discusses – invites his readers to work out views opposed to those he has expounded in the book! That should make the most credulous students safe from philosophical witchcraft for life.

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### Informed consent. Patient autonomy and physician beneficence within clinical medicine

Stephen Wear, Dordrecht, Kluwer Academic Publishers, 1993, 177 pages, £44.55

Although the doctrine of informed consent has many advocates among bioethicists and lawyers it is treated with scepticism by clinicians. This is not only because many practising clinicians often doubt whether informed consent is really needed and whether patients are willing and able to participate in medical decision-making but also because they are not clear what informed consent means in practical terms at the bedside.

It is to those unconvinced clinicians that this book is mainly addressed. The author argues strongly in favour